PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

2011 MAR 29 MM D 28

							SECRETAR	137		
DOCUMENT # L06000116930  1. Limited Liability Company's Name						SECRETARY OF STATE TALLAHASSEE, FLORIDA				
ONE WORLD FLORIDA L.L.C.						800199715818 03/29/1101024029 **546,25 CR2E041 (1/11)				
2. Principal Office Address - No P.O. Box # 3. Mailing Office										
13915 SW 163RD STREET 8441 W. Suite, Apt. #, etc. Suite, Apt. #,			. COMMERCIAL BLVD.		4. State/Coun FLORID	try of Formation				
Suite, Apr. 1	r, etc.	Julie, Apr. #,	eic.			5. Date Organ	ized or Qualified	40/00/0	000	
City & State City & State						To Do Business in Florida 12/06/2006				
			RAC, FLORIDA			6. FEI Number Applied For 20-8036438 Not Applicable				
<sup>Zip</sup> 33177	7-1925 US	<sup>Zip</sup> 33351		US	ntry	7. CERTIFICATE	OF STATUS DESIR		Additional Fee required a Certificate of Status	
8. Name and Address of Current Registered Agent										
Name JORGE O. PURICELLI						E-mail	Address:			
Street Address (P.O. Box Number is Not Acceptable) 8441 W. COMMERCIAL BLVD.										
Suite, Apt. #, Etc.										
City TAMARAC				State Zip Code (To be used for future annual report no				report notices)		
9. I, being	appointed the registered agont of the	emed limited	d liability co	mpany,	am familiar with and	accept the obligat	ons of Chapter 60	8, F.S.		
Signatu		Luca			am familiar with and	accept the obligat		8, F.S. 325-	11	
Signatu Registe	re of red Agent	REGISTERED AG	SENT MUST		am familiar with and	accept the obligat			11	
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